POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).							
I hereby appoint:							
Practitioners associated with the Customer Number:			23623				
OR							
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):							
	Name		Registration	Nar	યક	Registration Number	
	**********************		Number	***************************************		790373355	
	************		·····				

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with							
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).							
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:							
The address associated with Customer Number			2:	23623			
OR							
Firm a Individ	m er Indust Name Turocy & Watson, LLP						
Address	Address 127 Public Square, 57th Floor, Key Tower						
City		Cleveland	State Ohio	State Ohio		^{Zip} 44 j 14	
Country Telephone		United States					
		(216) 696-8730 Email		Email watson@th	watson@thepatentattorneys.com		
Assignee Name and Address:							
Cailtae, Voss & Pij Mgmt., L.L.C.							
2711 Centerville Rd., Suite 400							
Attn: Dept. 307							
Wilmington Delaware 19808							
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/86 or squivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of							
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee.							
and must identify the application in which this Power of Attorney is to be filed.							
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignce							
Signature / Lus Brack			*	Date 9/8/3-020			
Name (Cheryl Br	radicy Telephone					
Tille Authorized Person for Cailtae, Nose & Pij Mgmt., L.L.C.							
This collection of information is recurred by 37 CFR 1,31, 1,32 and 1,33. The information is required to obtain or retain a benefit by the public which is to file (and							

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S. 1.22 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450.

DECLARATION REGARDING AUTHORITY TO SIGN ON BEHALF OF A LEGAL ENTITY 37 C.F.R. 3.73(b)(2)(i)

I, Cheryl Bradley (whose title is supplied below), hereby declare that I am authorized to sign on behalf of Cailtae, Voss & Pij Mgmt., L.L.C.

Cheryl Bradley, Authorized Person for Cailtae, Voss & Pij Mgmt., L.L.C.

[date]